

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTON

CASE MANAGEMENT SERVICES

A. Target Group:

All Medicaid recipients under age 21 whose family or caretaker needs assistance in accessing necessary medical, social, educational, and other services.

B. Areas of State in which services will be provided:

☒ Entire State

This service will be offered on a statewide basis as service delivery systems are developed and become available.

C. Comparability of Services:

☒ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Case management is an ongoing process to assist the recipient(s) to obtain and effectively utilize necessary medical, social, educational and other services.

Description of Service:

Core Functions: The core functions of the case manager are to provide or assist in providing:

Linkage: Help recipient(s) to access services through linkages between support systems to avoid duplication of services. Identify recipient needs in physical, environmental, psychosocial, developmental, educational, behavioral, emotional, and mobility areas.

Planning: Prepare a service plan that reflects the recipient's need as identified through the assessment process.

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Implementation: Assure that the recipients) receives services as indicated in the service, plan and regular contacts to encourage cooperation, and resolve problems which may create barriers.

Advocacy: Assist the recipient(s) to follow through on recommendations.

Accountability: Retain documentation of case management services provided. Submit data as required.

E. Any qualified provider may contract with DCFS, which is a unit within DSHS, the single state Medicaid agency.

1. Case Managers

- a. A case manager will be either a professional or a paraprofessional under the direct supervision of a professional.
- b. Case managers will have a minimum of one year of on-the-job experience involving contact with the public in a client-service setting.
- c. In addition, the following are the specific minimum requirements for each category of case managers:
 - (1) Nurse - B.S.N. with course work in public health; or a registered nurse with two years of experience in parent-child nursing.
 - (2) Social service worker - Master's Degree in Social Work in Behavioral Science or related, field, with one year of experience in community social services or public health services or related field. Other Master's or, Bachelor's Degree may be substituted with two years closely-related work experience in community social services, public health services, or related field.

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- (3) Certificated teachers - Specialized training and experience in parenting education, child development, nutrition, family resource management, health, intervention, and one year on-the-job experience.
 - (4) Educational Staff Associate - Certification as a school counselor, school psychologist, school nurse, school social worker, or physical or speech or occupational therapist and one year on-the-job experience.
 - (5) Substance Abuse Counselor - Meet the requirements of a Qualified or Certified Counselor as defined in WAC 275-19-145(1) and one year on-the-job experience.
 - (6) Paraprofessional - Under direct supervision of a registered nurse or social service worker case management provider, a paraprofessional may conduct case management activities. Associate Degree in Behavioral Health Sciences related field and two years of closely related work experience. Two additional years of appropriate experience could be substituted for the degree.
- d. Foster parents may not serve as case managers for foster children.

2. Case Management Agencies

- a. Public or private social, health or education agencies employing staff with case manager qualifications. This includes state DSHS staff.
- b. Demonstrate linkages and referral ability with essential social and health service agencies and individual practitioners.
- c. Has experience working with low-income families, especially children.
- d. Meets applicable federal and state laws and regulations governing the participation of providers in the Medicaid program.

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- F. The state assures that there will be no restrictions on a recipient's free choice of providers in violation of Section 1902 (a) (23) of the Act.
1. Eligible recipients will have free choice to receive or not receive case management services.
 2. Eligible recipients will have free choice of the providers of case management services.
 3. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.